

SUNNY RIDGE  
3014 ERIE AVESHEBOYGAN 53081 Phone:(920) 459-3028  
Operated from 1/1 To 12/31 Days of Operation: 366  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/04): 265  
Total Licensed Bed Capacity (12/31/04): 265  
Number of Residents on 12/31/04: 253Ownership:  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 250

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		32.8	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		34.4	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.6	Under 65	7.1	More Than 4 Years		32.8	
Day Services	No	Mental Illness (Org./Psy)	34.0	65 - 74	14.6			-----	
Respite Care	Yes	Mental Illness (Other)	12.3	75 - 84	34.0			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.2	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.1	Full-Time Equivalent			
Congregate Meals	No	Cancer	1.6		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	3.6		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	9.9	65 & Over	92.9	-----			
Transportation	No	Cerebrovascular	11.5		-----	RNs		9.5	
Referral Service	No	Diabetes	4.3	Gender	%	LPNs		6.3	
Other Services	No	Respiratory	5.5		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	15.8	Male	33.2	Aides, & Orderlies			
Mentally Ill	Yes	-----	-----	Female	66.8	48.0			
Provide Day Programming for		100.0	-----		-----	-----			
Developmentally Disabled	Yes				100.0	-----			

## Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	6	3.3	137	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	2.4	
Skilled Care	19	100.0	335	152	84.4	117	0	0.0	0	53	98.1	163	0	0.0	0	0	0.0	0	224	88.5	
Intermediate	---	---	---	21	11.7	97	0	0.0	0	1	1.9	163	0	0.0	0	0	0.0	0	22	8.7	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	1	0.6	175	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.4	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	19	100.0		180	100.0		0	0.0		54	100.0		0	0.0		0	0.0		253	100.0	

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	13.9	Bathing	1.6	69.2	29.2	253
Private Home/With Home Health	2.6	Dressing	15.4	58.1	26.5	253
Other Nursing Homes	2.2	Transferring	32.4	46.2	21.3	253
Acute Care Hospitals	80.1	Toilet Use	25.7	49.8	24.5	253
Psych. Hosp.-MR/DD Facilities	0.4	Eating	65.6	21.7	12.6	253
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.9					
Total Number of Admissions	231	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	4.3	Receiving Respiratory Care	4.0	
Private Home/No Home Health	13.0	Occ/Freq. Incontinent of Bladder	65.2	Receiving Tracheostomy Care	0.4	
Private Home/With Home Health	17.4	Occ/Freq. Incontinent of Bowel	36.4	Receiving Suctioning	0.4	
Other Nursing Homes	7.0			Receiving Ostomy Care	1.6	
Acute Care Hospitals	3.9	Mobility		Receiving Tube Feeding	0.8	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	5.1	Receiving Mechanically Altered Diets	33.6	
Rehabilitation Hospitals	0.9					
Other Locations	5.7	Skin Care		Other Resident Characteristics		
Deaths	52.2	With Pressure Sores	4.7	Have Advance Directives	94.5	
Total Number of Discharges		With Rashes	8.7	Medications		
(Including Deaths)	230			Receiving Psychoactive Drugs	60.5	

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Government Peer %	Group Ratio	Bed Size: 200+ Peer %	Group Ratio	Licensure: Skilled Peer %	Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.3	93.1	1.01	97.9	0.96	90.5	1.04	88.8	1.06
Current Residents from In-County	90.9	86.2	1.05	83.3	1.09	82.4	1.10	77.4	1.17
Admissions from In-County, Still Residing	31.2	33.0	0.94	26.7	1.17	20.0	1.56	19.4	1.61
Admissions/Average Daily Census	92.4	79.1	1.17	76.8	1.20	156.2	0.59	146.5	0.63
Discharges/Average Daily Census	92.0	78.7	1.17	87.5	1.05	158.4	0.58	148.0	0.62
Discharges To Private Residence/Average Daily Census	28.0	29.9	0.94	34.1	0.82	72.4	0.39	66.9	0.42
Residents Receiving Skilled Care	90.9	89.7	1.01	87.3	1.04	94.7	0.96	89.9	1.01
Residents Aged 65 and Older	92.9	84.0	1.11	86.6	1.07	91.8	1.01	87.9	1.06
Title 19 (Medicaid) Funded Residents	71.1	73.3	0.97	72.7	0.98	62.7	1.14	66.1	1.08
Private Pay Funded Residents	21.3	18.3	1.17	19.2	1.11	23.3	0.92	20.6	1.04
Developmentally Disabled Residents	1.6	2.7	0.59	2.7	0.60	1.1	1.41	6.0	0.26
Mentally Ill Residents	46.2	53.0	0.87	49.5	0.93	37.3	1.24	33.6	1.38
General Medical Service Residents	15.8	18.6	0.85	20.2	0.78	20.4	0.77	21.1	0.75
Impaired ADL (Mean)	47.5	47.5	1.00	50.0	0.95	48.8	0.97	49.4	0.96
Psychological Problems	60.5	69.4	0.87	65.9	0.92	59.4	1.02	57.7	1.05
Nursing Care Required (Mean)	6.8	7.4	0.92	8.0	0.85	6.9	0.98	7.4	0.91